

DOCKET NO. PF02047NA/10-33

**MOTOROLA****FAX TRANSMITTAL SHEET****RECEIVED  
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Intellectual Property Section  
Law Department  
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Libertyville, Illinois 60048

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**14**

Number of Pages (including this page)

Date: June 15, 2005  
To: Examiner John F. Gianola – Art Group 2145  
Location: United States Patent and Trademark Office  
Fax No.: (703) 872-9306  
From: Hisashi David Watanabe - 37,465  
Subject: 09/994,644– Goodman, Robert Gary Confirmation No.: 8587

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**MESSAGE:**

Enclosed herewith, please find AMENDMENT and associated papers, if any, for filing in the below-identified application.

**PLEASE GIVE THESE PAPERS TO:**

EXAMINER:  
GROUP ART UNIT:  
SERIAL NO.:  
FILED:  
INVENTOR:

Gianola, John F.  
2145  
09/994,644  
NOVEMBER 28, 2001  
GOODMAN, ROBERT GARY

<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)		Application Number	09/994,644
		Filing Date	November 28, 2001
		First Named Inventor	Goodman, Robert Gary
		Group Art Unit	2145
		Examiner Name	Gianola, John F.
Total Number of Pages in this Submission		Attorney Docket Number	PF02047NA/10-33

<b>ENCLOSURES</b> (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-Related papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CDs _____	<input type="checkbox"/> After Allowance Communication to a Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter with appropriate copies <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below) Statement Under 37 CFR 3.73(b)
Remarks X Facsimile Transmittal		

<b>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT</b>			
Firm or Individual	Hisashi David Watanabe	Registration No.	37,465
Signature	<i>Hisashi D. Watanabe</i>		
Date	June 15, 2005		

<b>CERTIFICATE OF TRANSMISSION</b>			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO to facsimile number (703) 872-9306 on the date listed below:			
Typed or printed name	Hisashi David Watanabe		
Signature	<i>Hisashi D. Watanabe</i>		Date
			June 15, 2005

<b>FEE TRANSMITTAL</b> Patent fees are subject to annual revision <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27						<b>Complete if Known</b>																																																																																																																																														
<b>TOTAL AMOUNT OF PAYMENT</b> (\$ ) 0.00						<b>Application Number</b> 09/994,644																																																																																																																																														
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<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None						<b>First Named Inventor</b> Goodman, Robert Gary																																																																																																																																														
<input checked="" type="checkbox"/> Deposit Account: Deposit Account Number <span style="border: 1px solid black; padding: 2px;">502117</span> Deposit Account Name <span style="border: 1px solid black; padding: 2px;">Motorola, Inc.</span>						<b>Examiner Name</b> Gianola, John F.																																																																																																																																														
The Director is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Charge fees(s) indicated below, except for the filing fee to the above-identified deposit account.						<b>Group Art Unit</b> 2145																																																																																																																																														
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<b>2. EXTRA CLAIM FEES</b> Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent Multiple Dependent Claims						<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> </tr> </thead> <tbody> <tr><td>50</td><td>25</td></tr> <tr><td>200</td><td>100</td></tr> <tr><td>350</td><td>180</td></tr> </tbody> </table>		Fee (\$)	Small Entity Fee (\$)	50	25	200	100	350	180																																																																																																																																					
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<b>3. APPLICATION SIZE FEE</b> If the specification and drawings exceed 100 sheets of paper, the application size fee is \$250 (\$125 for small entity) For each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).						<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> </tr> </thead> <tbody> <tr><td>250</td><td>0</td></tr> </tbody> </table>		Fee (\$)	Fee Paid (\$)	250	0																																																																																																																																									
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